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AMENDMENT TRANSMITTAL LETTER (SMALL) Applicant(s): Davidson, P. et al.				Docket No. 820802-1010		
Serial No. 10/804,825	Filing Dat 03/19/200		niner Con aley	nfirmation No. 7112		Group Art Unit 1614
Invention: Method and System for Determining Insulin Dosing Schedules and Carbohydrate-To-Insulin Ratios in Diabetic Patients						
Commissioner for Patents Mall Stop Amendment P.O. Box 1450 Alexandria VA 22313-1450 Transmitted herewith is Response to Restriction Requirement in the above-identified application. The fee has been calculated and is transmitted as shown below						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR			TE	ADDITIONAL FEE
TOTAL CLAIMS	134 -	131 =	3	Х	\$50.00	\$150.00
INDEP. CLAIMS 2 -		=		Х	\$200.00	\$
Multiple Dependent Claims (check if applicable) \$360.00						\$
EXTENSION FEE	1 ST MONTH	2 ND MONTH	3 ^{RU} MONTH	4 ^{IH} MONTH 🔯		\$795.00
Other 5-1-1	\$60.00	\$225.00	\$510.00	\$795.00		s
Other Fees: TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$945.00
No additional fee is required. Please charge Deposit Account No. 20-0778 in the amount of 945.00. A duplicate copy of this page is enclosed. A check in the amount of to cover the filing fee is enclosed. A Credit Card Payment Form PTO-2038 is attached in the amount of \$ The Director is hereby authorized to charge any deficiencies of the above fees or credit any overpayment to Deposit Account No. 20-0778. Sixt. 2006 Date D						

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CERTIFICATE OF FACSIMILE TRANSMISSION UNDER 37 CFR §1.8

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted on the date indicated below via facsimile to the United States Patent and Trademark Office, facsimile number (571)-273-8300.

Date: 9/13/2006

Laurie Delesandro

In Re Application of:

Davidson, Paul.

Group Art Unit: 1614

Serial No.: 10/804,825

Examiner: Whaley

Filed: 03/19/2004

Docket No. 820802-1010

For: Method and system for Determining Insulin Dosing Schedules and Carbohydrate-To-

Insulin Ratios in Diabetic Patients

The following is a list of documents enclosed:

Return Postcard
Response to Restriction Requirement
Petition for Extension of Time
Amendment Transmittal

Further, the Commissioner is authorized to charge Deposit Account No. 20-0778 for any additional fees required. The Commissioner is requested to credit any excess fee paid to Deposit Account No. 20-0778.